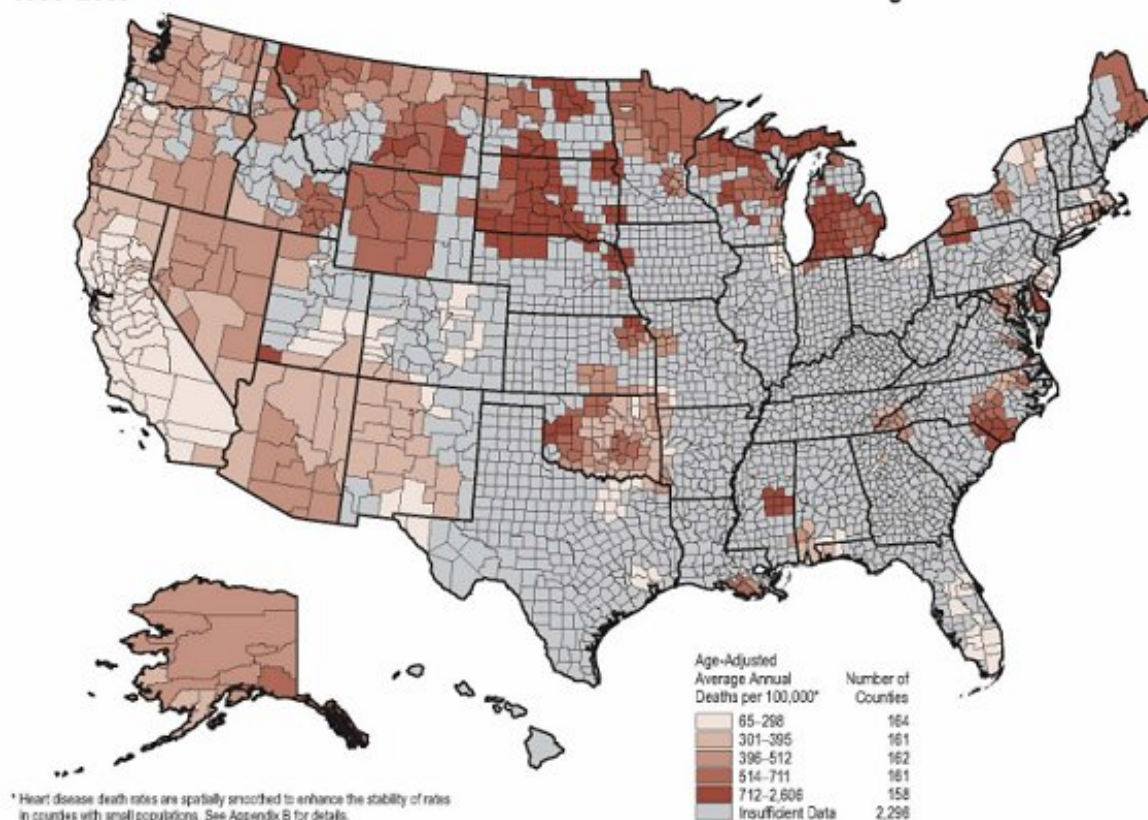


American Indian and Alaska Native Heart Disease and Stroke Fact Sheet

Smoothed County Heart Disease Death Rates
1996–2000

American Indians and Alaska Natives
Ages 35 Years and Older



Heart disease death rates are spatially smoothed to enhance the stability of rates in counties with small populations. Deaths are defined according to the following International Classification of Diseases (ICD) codes: ICD-9: 390–398, 402, 404–429; ICD-10: 100–109, I11, I13, 120–151. Data Sources: National Vital Statistics System, CDC, and the U.S. Census Bureau.

American Indian and Alaska Native Heart Disease and Stroke Facts

- Heart Disease is the first and stroke the sixth leading cause of death Among American Indians and Alaska Natives.*
- The heart disease death rate was 20 percent greater and the stroke death rate 14 percent greater among American Indians and Alaska Natives (1996–1998) than among all U.S. races (1997) after adjusting for misreporting of American Indian and Alaska Native race on state death certificates.*
- The highest heart disease death rates are located primarily in South Dakota and North Dakota, Wisconsin, and Michigan.†
- Counties with the highest stroke death rates are primarily in Alaska, Washington, Idaho, Montana, Wyoming, South Dakota, Wisconsin, and Minnesota.†

- American Indians and Alaska Natives die from heart diseases at younger ages than other racial and ethnic groups in the United States. Thirty-six percent of those who die of heart disease die before age 65.[§]
- Diabetes is an extremely important risk factor for cardiovascular disease among American Indians.[¶]
- Cigarette smoking, a risk factor for heart disease and stroke, is highest in the Northern Plains (44.1%) and Alaska (39.0%) and lowest in the Southwest (21.2%) among American Indians and Alaska Natives. ^{**}

*Indian Health Service. Trends in Indian Health, 2000–2001. Rockville, Maryland: U.S. Department of Health and Human Services, 2004.

[†] Casper ML, Denny CH, Coolidge JN, Williams GI Jr, Crowell A, Galloway JM, Cobb N. Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and Indian Health Service, 2005. http://www.cdc.gov/cvh/library/aian_atlas/index.htm

[§]SS Oh, JB Croft, KJ Greenlund, C Ayala, ZJ Zheng, GA Mensah, WH Giles. Disparities in Premature Deaths from Heart Disease—50 States and the District of Columbia. MMWR 2004;53:121–25. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5306a2.htm>

[¶]Howard BV, Lee ET, Cowan LD, et al. Rising tide of cardiovascular disease in American Indians: the Strong Heart Study. Circulation. 1999;99: 2389–2395.

^{**}CDC. Surveillance for health behaviors of American Indians and Alaska Natives: findings from the Behavioral Risk Factor Surveillance System, 1997–2000. In: CDC Surveillance Summaries (August 1). MMWR 2003;52(No. SS–7). <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5207a1.htm>

CDC Activities to Reduce the Burden of Heart Disease and Stroke Among American Indians and Alaska Natives

Atlas of Heart Disease and Stroke Among American Indians and Alaska Natives

This atlas is the first in a series of atlases to focus on a specific racial or ethnic group. It contains county level heart disease and stroke mortality maps (1995–1999) as well as state level surveillance data on heart disease and stroke risk factors (2001–2003). This information can help health professionals and concerned citizens tailor prevention policies and programs to communities with the greatest burden and risk. Available at:

http://www.cdc.gov/cvh/library/aian_atlas/index.htm

CDC Funded State Heart Disease and Stroke Prevention Programs

CDC currently funds health departments in 32 states and the District of Columbia to develop, implement, and evaluate programs that promote heart-healthy and stroke-free communities; prevent and control heart disease, stroke, and their risk factors; and eliminate disparities among populations. These programs emphasize the use of education, policies, environmental strategies, and systems changes to address heart disease and stroke in various settings and to ensure quality of care. The programs in Alaska, Kansas, Maine, Minnesota, Montana, Nebraska, Oklahoma, Virginia, and Wisconsin are currently collaborating with American Indian and Alaska Native communities. For more information, visit www.cdc.gov/cvh/state_program/index.htm.

WISEWOMAN

The WISEWOMAN program provides low-income, under insured and uninsured women aged 40–64 years with chronic disease risk factor screening, lifestyle intervention, and referral services

in an effort to prevent cardiovascular disease. CDC funds 15 WISEWOMAN projects, which operate on the local level in states and tribal organizations. Projects provide standard preventive services including blood pressure and cholesterol testing, and programs to help women develop a healthier diet, increase physical activity, and quit using tobacco. WISEWOMAN funds two programs working with Alaska Native women as well as programs serving American Indian women in Nebraska, Nevada, and South Dakota. For more information, visit www.cdc.gov/wisewoman.

REACH 2010

REACH 2010 is designed to eliminate disparities in cardiovascular disease as well as immunizations, breast and cervical cancer screening and management, diabetes, HIV/AIDS, and infant mortality. REACH 2010 supports community coalitions in designing, implementing, and evaluating community-driven strategies to eliminate health disparities. The activities of these community coalitions include continuing education on disease prevention for health care providers, health education and health promotion programs that use lay health workers to reach community members, and health communications campaigns. REACH funds core capacity building projects in American Indian and Alaska Native communities in Albuquerque, NM; Oklahoma City and Tahleah, OK; Anchorage, AK; and Nashville, TN. For more information, visit www.cdc.gov/reach2010.

For More Information

For more information on heart disease and stroke among American Indians and Alaska Natives, visit the following web sites.

CDC's Cardiovascular Health Program

<http://www.cdc.gov/cvh>

Indian Health Service

<http://www.ihs.gov>

Native American Cardiology Program

<http://www.ihs.gov/medicalprograms/cardiology/card/index.cfm>

American Heart Association*

<http://www.americanheart.org>

American Stroke Association*

<http://www.strokeassociation.org>

National Heart, Lung, and Blood Institute

<http://www.nhlbi.nih.gov/>

*Links to non-Federal organizations are provided solely as a service to our users. Links do not constitute an endorsement of any organization by CDC or the Federal Government, and none should be inferred. The CDC is not responsible for the content of the individual organization Web pages found at this link.